UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MICHIGAN

Receipt 1005562

COVER SHEET FOR AMENDMENTS

Case N	ame: <u>lauva L</u>	U(a) Case No.: 19-3()218		
DESCRIBE INFORMATION BEING AMENDED BY CHECKING APPLICABLE BOX(ES) BELOW:				
☐ Ar	mendment to Petition: ☐ Name ☐ Debtor(s) Mailing Address ☐ Alias ☐ Signature ☐ Complying with Order Directing the Filing of Official Form(s)			
□ St	Summary of Your Assets and Liabilities and Certain Statistical Information Statement of Financial Affairs			
	Schedules and List of Creditors: ☐ Schedule A/B ☐ Schedule C ☐ Debtor 2 Schedule C			
XIι	List of Creditors Schedule D Schedule E/F and Add creditor(s), provide address of creditor already on the List of Creditors, change amount or			
classification of debt - \$31.00 Fee Required, or Change address of a creditor already on the List of Creditors – No Fee Required Schedule G Schedule H Schedule I				
☐ Schedule J☐ Schedule J-2 NOTE: Use Page 2 for any corrections or additions to the List of Creditors.				
Additional Details of Amendment(s):				
•	DECLARATION OF ATTORNEY: I declare that the above information contained on this cover sheet may be relied upon by the Clerk of the Court as a complete and accurate summary of the information contained in the documents attached.			
Date		Signature		
→	AFFIRMATION OF DEBTOR(S): I declare under penalty of perjury that I have read this cover sheet and the attached schedules, lists, statements, etc., and that they are true and correct to the best of my knowledge, information and belief.			
Date	3-19	Signature Jama L Julan		
Date		Signature		

CORRECTIONS TO THE LIST OF CREDITORS

Use this section to make corrections to the name(s) and address(es) of any creditor(s) listed on the current schedules and List of Creditors. **PLEASE CHANGE TO:** PREVIOUS NAME/ADDRESS OF CREDITOR: PLEASE CHANGE TO: PREVIOUS NAME/ADDRESS OF CREDITOR: PLEASE CHANGE TO: PREVIOUS NAME/ADDRESS OF CREDITOR: **ADDITIONS TO THE LIST OF CREDITORS** Use this section to identify creditors added to the schedules and List of Creditors. See attachment NAME OF CREDITOR: **ADDRESS:** NAME OF CREDITOR: ADDRESS: NAME OF CREDITOR: **ADDRESS:**

FOR ADDITIONAL CORRECTIONS/ADDITIONS, COPY THIS SHEET AND CONTINUE.

Kayleen P. Hendler Attorney and Counselor at Law PO Box 476 Lapeer, MI 48446

Kellam and Associates, P.C. 7619 Solution Center Chicago, IL 60677-7006

Lapeer County Surgery Center 1546 Callis Rd Lapeer, MI 48446

Lapeer Womens Health Ramona D Andrei 2605 Sequoia CT Bloomfield Hills, MI 48304-1838

Law Offices of David Brown 1820 N. Lapeer Rd Suite 2A Lapeer, MI 48446

McLaren Facility – PP PO Box 775373 Chicago, IL 60677-5373

McLaren Flint Dept #77498 PO Box 77000 Detroit, MI 48277-0498

McLaren Lapeer Region Dept. 77828 PO Box 77000 Detroit, MI 48277-0828

McLaren – Lapeer Region PO Box 441575 Detroit, MI 48244-1575

McLaren Medical Group Dept. 77312 PO Box 77000 Detroit, MI 48277-0312

McLaren Oakland 8600 Reliable Pkwy Chicago, IL 60686-0086

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MICHIGAN SOUTHERN DIVISION

IN THE MATTER OF	CASE NO: 19-3 CHAPTER: 7 JUDGE:	W218
Jaura L Lucas	_/	
<u>PROC</u>	F OF MAILING	
I, the undersigned, hereby certify that of		•
sent by mail copies of Notice a P	inkruptey	
	, in the above-entitle	
to the following person(s):		
see attached		· ·
		
	·	· ·
	^	
DATED: 2-13-19	SIGNED: Laura & Lu	Cto_
PRINT NAME/ADDRESS/PHONE		E #:
	Laura Llucas	
	114 Twin Oaks Dr	
	Laper, m1 48446	
	810-614-0850	

Kayleen P. Hendler Attorney and Counselor at Law PO Box 476 Lapeer, MI 48446

Kellam and Associates, P.C. 7619 Solution Center Chicago, IL 60677-7006

Lapeer County Surgery Center 1546 Callis Rd Lapeer, MI 48446

Lapeer Womens Health Ramona D Andrei 2605 Sequoia CT Bloomfield Hills, MI 48304-1838

Law Offices of David Brown 1820 N. Lapeer Rd Suite 2A Lapeer, MI 48446

McLaren Facility – PP PO Box 775373 Chicago, IL 60677-5373

McLaren Flint Dept #77498 PO Box 77000 Detroit, MI 48277-0498

McLaren Lapeer Region Dept. 77828 PO Box 77000 Detroit, MI 48277-0828

McLaren – Lapeer Region PO Box 441575 Detroit, MI 48244-1575

McLaren Medical Group Dept. 77312 PO Box 77000 Detroit, MI 48277-0312

McLaren Oakland 8600 Reliable Pkwy Chicago, IL 60686-0086